

ABSTRACT

TITLE:

**FACTORS CONTRIBUTING TO FALLS AND THE EFFECT OF A
MULTIPRONGED APPROACH ON THE INCIDENCE OF FALLS IN THE
ELDERLY IN AN OUTPATIENT SETTING**

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OBJECTIVE:

Primary objective: To study the various factors contributing to falls in the elderly who presented to the Geriatric OPD in a tertiary care centre.

Secondary objective: To assess the effect of a multipronged approach on the prevalence of falls in these patients.

METHODS:

This study was conducted in department of Geriatrics at Christian Medical College Vellore between October 2017 and July 2018. Elderly patients who presented to the Geriatrics Outpatient Department with falls, or with a history of fear of fall, or imbalance while walking were recruited, after fulfilling the inclusion criteria. Informed consent was taken. The patient's demographic profile, comorbidities and current medications were documented on the proforma. The subjects were subjected to a clinical examination which included assessment of their cardiovascular status (heart rate, rhythm, postural hypotension) and a detailed neurologic examination.

A detailed geriatric assessment including a Barthel index, Mini Cog, Mini Nutritional Assessment, Timed Up and Go test, gait speed, Functional Reach test, hand grip estimation using the JAMAR Hand Dynamometer was performed. Baseline relevant investigations were sent. Based on the above assessments and investigations, an individualized multifactorial falls prevention interventional program was initiated.

The patients were followed up telephonically at one month and three month intervals after their initial OPD visit telephonically to assess drug and intervention compliance and a note was made, if they had fallen. All these results were statistically analyzed.

RESULTS AND CONCLUSION:

In this study, 48.3% had fallen in the past one year, of whom 16.7% were recurrent fallers. Subjects who were on sedatives and antidepressants and those who did not have an eye examination in the past year were found to have a higher risk of falls. These factors were significant on the univariate analysis.

In the present study following a multifactorial intervention, the incidence of falls reported was low and there was a good compliance to exercises and drugs during the limited follow up period.

KEYWORDS

Elderly, falls, multifactorial intervention, follow up.